

Please type a plus sign (+) inside this box → ☐

PTO/SB/21 (08-03)

Approved for use through 8/30/2003. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

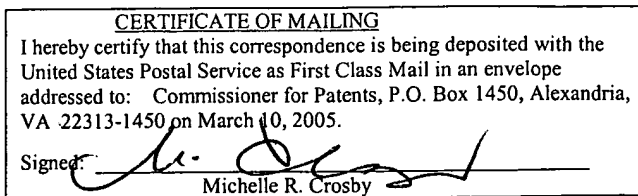
<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	<b>Application Number</b>	09/748,760	
	<b>Filing Date</b>	December 21, 2000	
	<b>First Named Inventor</b>	ALIREZA RAISSINIA et al.	
	<b>Group Art Unit</b>	2684	
	<b>Examiner Name</b>	John J. Lee	
<b>Total Number of Pages in This Submission</b>	13	<b>Attorney Docket Number</b>	CISCP667

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Return Postcard  <input type="checkbox"/> Other Enclosure(s) (please identify below):
<b>Remarks</b>		<b>The Commissioner is authorized to charge any additional fees to Deposit Account 50-1652.</b>
<b>In response to the Office Action dated April 9, 2004, please make the enclosed of record.</b>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
<b>Firm and Individual name</b>	RITTER, LANG & KAPLAN LLP Cindy S. Kaplan Reg. No. 40,043
<b>Signature</b>	
<b>Date</b>	March 10, 2005

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown: <span style="border: 1px solid black; padding: 2px;">March 10, 2005</span>			
<b>Typed or printed name</b>	Michelle R. Crosby		
<b>Signature</b>		<b>Date</b>	March 10, 2005

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No. : 09/748,760 Confirmation No.: 4516  
Applicant : ALIREZA RAISSINIA et al.  
Filed : December 21, 2000  
TC/A.U. : 2684  
Examiner : John J. Lee  
  
Docket No. : CISC667  
Customer No. : 26541  
Title : ADVANCED SIGNALING FOR MULTI-STAGE  
TRANSCEIVERS

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**AMENDMENT B AFTER FINAL**

Sir:

In response to the Office Action of January 18, 2005, please amend the above-identified application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 6 of this paper.